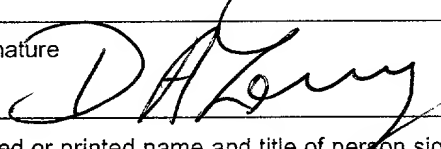


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION: CONSENT OF ASSIGNEE; STATEMENT OF NON-ASSIGNMENT		Docket Number (Optional) 551P04US-RE
This is part of the application for a reissue patent based on the original patent identified below.		
Name of Patentee(s) <u>Loran Network Management Ltd.</u>		
Patent Number <u>6,084,860</u>	Date Patent Issued <u>July 4, 2000</u>	
Title of Invention <u>Method for Determining the Drop Rate, the Transit Delay and the Break State of Communications Objects</u>		
<p>1. <input checked="" type="checkbox"/> Filed herein is a statement under 37 CFR 3.73(b). (Form PTO/SB/96)</p> <p>2. <input type="checkbox"/> Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.</p> <p>One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".</p> <p>The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.</p>		
<p>The assignee(s) owning an undivided interest in said original patent is/are <u>Loran Network Management Ltd.</u>, and the assignee(s) consents to the accompanying application for reissue.</p>		
Name of assignee/inventor (if not assigned) <u>Loran Network Management Ltd.</u>		
Signature 	Date <u>Oct 3 / 01</u> X	
<p>Typed or printed name and title of person signing for assignee (if assigned)</p> <p><u>David A. Levy (Chairman)</u> X</p>		

Burden Hour Statement. This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

FORM PTO/SB/53

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Loran Network Management Ltd.
Application No./Patent No.: 6,084,860 Filed/Issue Date: July 4, 2000
Entitled: Method for Determining the Drop Rate, the Transit Delay
and the Break State of Communications Objects

Loran Network Management, a corporation,
(Name of Assignee) Ltd. (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 9217, Frame 0905, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

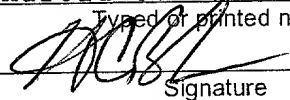
1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☒ Copies of assignments or other documents in the chain of title are attached.
[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Nov 19/01
Date

Harold C. Baker
Typed or printed name

Signature
Attorney of Record
Title



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
ASSISTANT SECRETARY AND COMMISSIONER
OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

AUGUST 11, 1998

PTAS



100733636A

PASCAL & ASSOCIATES
HAROLD C. BAKER
P.O. BOX 11121, STATION H
NEPEAN, ONTARIO, CANADA K2H 7T8

UNITED STATES PATENT AND TRADEMARK OFFICE
NOTICE OF RECORDATION OF ASSIGNMENT DOCUMENT

THE ENCLOSED DOCUMENT HAS BEEN RECORDED BY THE ASSIGNMENT DIVISION OF THE U.S. PATENT AND TRADEMARK OFFICE. A COMPLETE MICROFILM COPY IS AVAILABLE AT THE ASSIGNMENT SEARCH ROOM ON THE REEL AND FRAME NUMBER REFERENCED BELOW.

PLEASE REVIEW ALL INFORMATION CONTAINED ON THIS NOTICE. THE INFORMATION CONTAINED ON THIS RECORDATION NOTICE REFLECTS THE DATA PRESENT IN THE PATENT AND TRADEMARK ASSIGNMENT SYSTEM. IF YOU SHOULD FIND ANY ERRORS OR HAVE QUESTIONS CONCERNING THIS NOTICE, YOU MAY CONTACT THE EMPLOYEE WHOSE NAME APPEARS ON THIS NOTICE AT 703-308-9723. PLEASE SEND REQUEST FOR CORRECTION TO: U.S. PATENT AND TRADEMARK OFFICE, ASSIGNMENT DIVISION, BOX ASSIGNMENTS, CG-4, 1213 JEFFERSON DAVIS HWY, SUITE 320, WASHINGTON, D.C. 20231.

RECORDATION DATE: 06/01/1998

REEL/FRAME: 9217/0905
NUMBER OF PAGES: 2

BRIEF: ASSIGNMENT OF ASSIGNOR'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNOR:

DOC DATE: 05/25/1998

DAWES, NICHOLAS W.

ASSIGNEE:

LORAN NETWORK MANAGEMENT LTD.
TRIDENT HOUSE, 1ST FLOOR
BRIDGETOWN, BARBADOS

SERIAL NUMBER: 09014687
PATENT NUMBER:

FILING DATE: 01/28/1998
ISSUE DATE:

SHAREILL COLES, EXAMINER
ASSIGNMENT DIVISION
OFFICE OF PUBLIC RECORDS

2

ASSIGNMENT AND AGREEMENT

For value received, I **NICHOLAS W. DAWES**
 whose full post office address is 99 Lyttleton Gardens,
 Ottawa, Ontario,
 Canada, K1L 3A4
 hereby sell, assign and transfer to **LORAN NETWORK MANAGEMENT LTD.**
 whose full post office address is Trident House, 1st Floor,
 Bridgetown,
 Barbados

and its successors, assigns and legal representatives, the entire right, title and interest, for all countries, in and to certain inventions relating to **METHOD FOR DETERMINING THE DROP RATE, THE TRANSIT DELAY AND THE BREAK STATE OF COMMUNICATIONS OBJECTS** contained in an application for letters patent of **UNITED STATES** filed January 28, 1998 under Serial No. 09/014,687 all rights and privileges including priority rights arising from the application aforesaid and corresponding applications in other countries, all continuations, continuations-in-part, divisions, renewals, substitutes or reissues thereof, and all the rights and privileges under any and all letters patent that may be granted for said inventions.

I request that any and all patents for said inventions may be issued to said assignee, its successors, assigns and legal representatives, or to such nominees as it may designate.

I agree that, when requested, I will, without charge to said assignee but at its expense, sign all papers, take all rightful oaths, and do all acts which may be necessary, desirable or convenient for claiming said priority rights and for securing and maintaining patents for said inventions in any and all countries and for vesting title thereto in said assignee, its successors, assigns and legal representatives or nominees.

I covenant with said assignee, its successors, assigns and legal representatives, that the rights and property herein conveyed are free and clear of any encumbrance, and that I have full right to convey the same as herein expressed.

EXECUTED AT OTTAWA, CANADA.....)
 this 25th day of May.....)
 1998.

.....*N. Dawes*.....
 (Nicholas W. Dawes)

Witness:

.....*R. Desrosiers*.....

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

551P04US-RE

As a below named inventor, I hereby declare that:

My residence, mailing address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed

in patent number 6,084,860, granted July 4, 2000, and for which a

reissue patent is sought on the invention entitled Method for Determining the Drop Rate, the Transit Delay and the Break State of Communications Objects

the specification of which

☒ is attached hereto.

☐ was filed on _____ as reissue application number _____ / _____
and was amended on _____
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.

☐ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☒ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

This is not a broadening issue. Claim 3 is being amended to
change "at least one" to read --at least two--.

[Page 1 of 2]

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)

551P04US-Re

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.

Name(s)	Registration Number
Harold C. Baker	19333
Robert W. Wilkes	28170
Robert G. Hendry	22927

Correspondence Address: Direct all communications about the application to:

☐ Customer Number

Type Customer Number here

Place Customer Number Bar
Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	Shapiro Cohen				
Address	P.O. Box 3440				
Address	Station D				
City	Ottawa	State	Ontario	Zip	K1P 6P1
Country	Canada				
Telephone	613 232 5300	Fax	613 563 9231		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.					
Full name of sole or first inventor (given name, family name) Nicholas W. DAWES					
Inventor's signature		Date			
Residence		Citizenship			
Mailing Address					
99 Lyttleton Gardens, Ottawa, Ontario, Canada, K1L 3A4					
Full name of second joint inventor (given name, family name)					
Inventor's signature		Date			
Residence		Citizenship			
Mailing Address					
Full name of third joint inventor (given name, family name)					
Inventor's signature		Date			
Residence		Citizenship			
Mailing Address					
<input type="checkbox"/> Additional joint inventors are named on separately numbered sheets attached hereto.					

Please type a plus sign (+) inside this box +

PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Nicholas Dawes
Group Art Unit	
Examiner Name	
Attorney Docket Number	551P04US-RE

I hereby appoint:

☐ Practitioners at Customer Number →

Place Customer
Number Bar Code
Label here

☒ Practitioner(s) named below:

Name	Registration Number
Harold C. Baker	19333
Robert A. Wilkes	28170
Robert G. Hendry	22927

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☒ Firm or
Individual Name

Shapiro Cohen

Address P.O. Box 3440

Address Station D

City Ottawa State ON Zip K1P 6P1

Country Canada

Telephone 613-232-5300 Fax 613-563-9231

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Nicholas W. Dawes

Signature *N.W. Dawes* X

Date 5 Oct 2001 X

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.